#### NORTH CAROLINA STATE BOARD OF ELECTIONS

PO BOX 27255, RALEIGH NC 27611 TELEPHONE 919-733-7173



### NOTICE OF CANDIDACY 2008 COUNTY AND LEGISLATIVE

TO THE CRAVEN		BOARD OF ELECTIONS:	
	ndidate for nomination as	BOARD OF EDUCATION I	DISTRICT 5
	" \ / "	(Name of Off	fice)
District, in the	N/A	(Name of Offi Party Primary Election scheduled	for May 6, 2008.
I affiliate with the	F	Party, and I certify that I am now regis	stered on the registration records
of the precinct in which I re	eside as an affiliate of the	Party.	
I further certify that I have from "unaffiliated" status to	e not changed my political p o my current affiliation within	arty affiliation within the past ninety in the past ninety (90) days.	(90) days, nor have I changed
I pledge that if I am defeate	ed in the primary, I will not ru	un for any office as a write-in candida	te in the next general election.
Have you ever been convice (This shall not apply to candid If the answer is yes, provided in the convergence of the convergence		d) to file a Statement of Economic Interes	st)
Name of the offense:	N/A D	ate of the conviction:	
	#D	County and state of conviction:	
The felony does not need to innocence or expungement		s dismissed as a result of reversal on	appeal or resulted in a pardon of
I swear (affirm) that the s belief.	tatements contained on this	form are true, correct and complete	to the best of my knowledge or
3412 CAMELOT DRIVE		Becky Kafer	
Resid	ence Address	Name as it wi	ill appear on Ballot e of Candidate
NEW BERN, NC 28560	, State, Zip	Signatur	e of Candidate
City	, sidie, zip	(252) 627, 2002	
Mailing Ad	ddress, if different	Home Telephone	Work Telephone
City	, State, Zip		
	Certificatio	n of Notice of Candidacy	II.
I hereby certify that Becky	(Name as it will appear on Ballot)	, the candidate who signed above,	personally appeared
before me this day and sign	ned his/her signature to the al	bove Notice of Candidacy or acknow	ledged his/her signature to be the
same.			
This 22 <sup>nd</sup> day of	February , 2008.		
land	R MAD	, noto	~ ~
Jours &	9,400	Title of	Pertifying Officer
Signature of	Certifying Officer	Time by	certifying Officer
My commission expires:	10/16/08		,
		tion by County Board	REBECCA KAFER
	ned the voter registration reco		
The second secon	ted with the <u>Democrat</u>		lidate has not changed his/her
	thin the past ninety (90) days	,	Louis & DIFTER
County	2/	22/08 Date	Chairman or Director
This form is available as a pub office if rights of citizenship has		where filed. A prior felony conviction do	oes not preclude holding elected

# Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee. This form must be accompanied by forms CRO 3100 and CRO 3500

Amendment ☐ No ☐ Yes

	companied by forms CR	O 5100 and CK	0-3300.			
1. Committee Inform	mation				c. ID Number	
a. Full Name					C. ID Muniber	
Committee to Re-West Becky Kafer						
b. Mailing Address (include City, State and Zip Code)					d. Date Organized	
3412 Camelot Dr.				2/22/08		
New Bern,	NC 28560				e, Phone Number	
According				=	637	1-3992
2. Candidate Inform	nation		Candidate's Pr	imary Commit	7	
a. Full Name	Full Name		c. Candidate ID Number		d. Party Affiliation	
Rebecca (E	Rebecca (Becky) Kafer		6CD3CU		nonpartisan	
	lude City, State, and Zip Code	e)			f. Jurisdiction	
3412 Came	lot Dr.		Board of Education			
New Bern,	NC 28560			District 5		
			(If office sought is nonpartisan, write "Nonpartisan" in [APP   Party Affiliation.)		partisan" in [d]	
3. Treasurer Inforn	nation		4. Custodian of Books Information			
a. Full Name			a. Full Name			
Rebecca	Kafer					
	lude City, State, and Zip Code	e)	b. Mailing Address (include City, State, and Zip Code)			
3412 Can						
New Ber	n, NC 28560					
c. Phone Number	d. Email Address	0 0 10000 ( 2002)	c. Phone Number	d. Email Add	ress	
637-3992						
5. Assistant Treasu	rer Information	Add	6. Account Information (incl. CRO-3500) Add			
a. Full Name		Remove	a. Financial Institution Full Name Remove			
			je			
b. Mailing Address (include City, State, and Zip Code)		b. Purpose				
c. Phone Number	d. Email Address		c. Account Code	d. Type		
C. Thome I tunned	Ur Edmin raum voo					
CEDITIEICATION						
CERTIFICATION  I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.						
Rebeach Printer	N. KAFer d Name of Signer	Res	lerce m .=	Kefe	. 2	22/08 Date



#### North Carolina

State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

#### **Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:		
Candidate Name:	Rebecca (Becky) Kafer Rebecca (Becky) Kafer	
Treasurer Name:	Rebecca (Becky) Kafer	
Treasurer Address:	3412 Camelot Dr.	
(include city, state, & zip)	New Bern, NC 28560	
Treasurer Phone:	637-3992	

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

2/22/08 Date Signed Release M. Koff

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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#### **Certification of Threshold**

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle

FILED BY:	
Committee Name:	Committee to Re Elect Becky Kafer
Treasurer Name:	Rebecca (Becky) Kafer
Treasurer Address:	3412 Camelot Dr.
(include city, state, & zip)	New Bern, NC 28560
Treasurer Phone:	637-3992
election cycle under the pro- until the end of the election expenditures during this elec- of elections and file required THIS DECLARATION CAI	nittee intends to neither receive nor expend more than \$3,000 during the current cedures set forth in G.S. 163-278.10A. This certification will remain in effect cycle for this committee. If this committee exceeds \$3,000 in contributions or ction cycle, I understand that I must immediately notify the appropriate board campaign finance reports.  N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.  Certification to remain under the \$3000 threshold. I will now be required to the for all contributions and expenditures that have not been previously reported the rent election cycle. I further agree to file all future reports required.
2/22/68 Date Signed	Release M. Kafer

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

## Affidavit Attesting to Nickname (NCGS § 163-106(a))

I <u>Rebecca Melfon Kafer</u> have been duly sworn, hereby state under oath that I
have been commonly known by the nickname, Becky Kafer, for at least five years
and request that my name be placed on the ballot as follows: Becky Kafer . (Name to appear on ballot)
In the event that another candidate with the same last name as mine files notice of candidacy for the
same office for which I am a candidate, my name should be listed on the ballot as follows:
Rebecca (Becky) Kafer (legal name and nickname)
(Signature - legal name)
I herby certify that Rebecca Melton Kafer , the candidate who signed above,
personally and signed in my presence.
Sworn to and subscribed before me this <u>22</u> day of <u>February</u> , <u>2008</u> .
Motory Public  Title of Certifying Officer  Signature of Certifying Officer
My commission expires: $10/16/08$